

I claim:

1. In a method of placing a feeding tube in a patient wherein the feeding tube is inserted through the patient's nose or mouth and through the patient's pharynx for passage into and through the patient's esophagus for ultimate placement of the distal end of the tube in communication with the patient's small intestine, an improved method of determining that said distal tube end is passing into and through the esophagus rather than the patient's trachea, comprising the step of detecting the presence of CO<sub>2</sub> adjacent said distal tube end.

2. The method of claim 1, including the step of detecting the amount of CO<sub>2</sub> adjacent said tube end.

3. The method of claim 2, said amount-detecting step comprising the step of coupling a proximal portion of said tube with a CO<sub>2</sub> detecting machine in order to detect CO<sub>2</sub> passing through the tube from said distal end to said proximal portion.

4. A patient feeding tube comprising:  
an elongated tube presenting a distal end adapted for insertion into a patient and  
a proximal portion designed to remain outside the patient; and  
a fixture operably coupled with said proximal portion in order to permit attachment of a CO<sub>2</sub> detecting machine to the tube so that the presence of CO<sub>2</sub> adjacent said distal end may be detected when the tube is inserted into a patient.

5. The feeding tube of claim 4, said tube presenting a proximal end, said fixture comprising a tubular, bifurcated body presenting a pair of tubular legs, one of said legs secured to said proximal end, the other of said legs in communication with the interior of said tube.

6. The feeding tube of claim 5, including one or more intermediate coupling members for connecting said fixture and said machine.

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